



EmployeeUPDATE

Our Mission: To serve the people of North Carolina by enabling individuals, families and communities to be healthy and secure, and to achieve social and economic well-being.

A month publication for employees of the North Carolina Department of Health and Human Services

Child Protective Services reform focuses on coordinated approach

North Carolina's pilot program to overhaul child protective services provides families with the support they need without compromising children's safety or increasing



Jo Ann Lamm

instances of substantiated child abuse and neglect. This is the conclusion of a new study by Duke University's Center for Child and Family Policy.

Last month, the Center sent its findings about the state's Multiple Response System (MRS), implemented in

10 counties in August 2002, to the North Carolina General Assembly. (The report can be found at www.childandfamilypolicy.duke.edu.) Instead of relying only on traditional investigations, unannounced home visits and child interviews, MRS increases coordination between law enforcement agencies and child protective services, tailors its interventions to address the individual needs of families, and uses other key strategies to protect children.

At a child abuse symposium held in Wilmington last month, DHHS Secretary Carmen Hooker Odom spoke about MRS. "Other states are only beginning to test a new approach to responding to reports of abuse or neglect," she said. "North Carolina, however, is embracing **total** system reform, from intake through the placement of children."

"When it comes to child protection, we are never satisfied and never stop looking for ways to improve."

- JoAnn Lamm

The center studied four aspects of MRS, including child safety, timeliness of response, timeliness of service, and coordination of local human services.

The evaluation found, among other things:

- County social workers and supervisors overwhelmingly agree that MRS is a preferred and more respectful way to serve families that allows them to consider all the family circumstances, not just an alleged incident;

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Secretary's Letter

Thank you for touching the lives of all North Carolinians

Dear DHHS Employee,

Since 1985, the first week in May has been designated Public Service Recognition Week. This is an opportunity to educate the public about all that government employees do to improve the world. It is also a time to thank state employees for their fine work.

I would like to take this opportunity to personally thank each of the more than 16,000 employees of DHHS. DHHS is one of the largest agencies in state government, comprising more than 19 percent of the total state work force (excluding the University System). No other agency touches the lives of so many North Carolinians in so many ways.

It has been said that there are some things, like death and taxes, that are unavoidable. I would add to that list – it is impossible to *not* be touched by our department and its wonderful, dedicated employees in some way.



From the cradle to the grave, DHHS is improving the lives of all North Carolinians. Before a baby is even conceived in North Carolina, DHHS is working to make that child healthier – by educating its mother on the benefits of prenatal care. That DHHS connection continues through life. North Carolina is a healthier, safer place because of your efforts, which must not go unrecognized.

Sometimes government employees are easy targets. Lots of bombastic people want to talk about government waste and bureaucrats and say that we are not doing our jobs. I say to them – and to you – that we are doing our jobs and the state is a much better place because of the many hours you spend on the job. I challenge our critics to imagine a world without DHHS. It isn't a pretty thought. You do so much to improve the lives of your neighbors. On their behalf, I thank you.

Sincerely,

A handwritten signature in cursive script, reading "Carmen Hooker Odom". The ink is a dark color, and the signature is fluid and legible.

Carmen Hooker Odom



Jalil Isa

¡Salud y Saludos!

Some cultural differences are subtle

I frequently write about general observations about differences between the Latino culture and those of other lands - in most cases, America. These differences are noted with the intention of expanding our horizons from our end - here in this country - and helping foster greater understanding about other peoples.

I am often struck by the contrasts between cultures. Sometimes these cultural differences are very subtle, such as would be the case with acceptable 'personal space' or perhaps with norms related to greetings.

On a recent trip to Cuba to visit my grandfather, I was once again confronted with some subtle, and some not-so-subtle, differences between the Cuban culture as it exists today and the culture of countless folks who live where I grew up, just 90 miles to the north of Cuba. Many in the Cuban exile community throughout Miami and other parts of the United States hold on to dreams of a free Cuba (hopefully it is unnecessary to clarify further). But while predicting exactly what will come about in a free Cuba, and how that transition will take place, is speculation at best. It became quite obvious to me that cultural clashes will abound.

For one thing, I was dismayed by the environmental awareness - or lack thereof - of the Cuban people. Time and time again, I saw Cubans throwing all kinds of trash right out their car window. This could mean bottles, soda cans, or any other item many Americans would cringe to see tossed by the side of the road. Or we'd be walking along, and the people I was with would see me looking for a garbage bin to properly dispose of some trash and insist I just "throw it over there," pointing to the side of a street or sidewalk. Even those with the best intentions

may find themselves hard pressed to act appropriately, given the lack of trash cans, to begin with.

Another noticeable characteristic I found myself having to comment on was the way people summon other strangers in the street. When driving around and attempting to ask for directions, the people I was with would always draw the attention of a bystander by "psst"-ing them. It was the sort of loud "psst" that often precedes fights where I grew up. Yet, this and other peculiar (to us) behaviors were absolutely normal and appropriate in the environment in which we found ourselves.

But it was different enough for me to warn them they might want to consider modifying this behavior, if one day Cuba did become a more free island nation and established closer ties with American society. They were very amused by my remarking that the "psst" could incite an unexpected and undesired reaction. They also couldn't understand my reluctance to simply toss the soda can out the car window. All of this reminded me once again about the importance of taking note of cultural norms.

But then, just as importantly, it also is important to open our minds to understand the causes of different behavior. You might feel you can argue how some behaviors or actions are *better* than others. But more often than not, I come across people who are stuck in their ways and feel their behavior is the *only* right way ... without even being able to reason why they feel this way. The reality of the matter is that "psst"-ing someone is not any less appropriate than shaking someone's hand rather than hugging them (a behavior which would be more prevalent in the U.S., but potentially perceived as less friendly).

It is important when appreciating these differences to also explore the roots of what has shaped this behavior. In the case of summoning someone, this is simply the way Cubans are accustomed to calling on a stranger. It is as normal to them, as it is different to us.

And in the case of their environmental awareness, this is simply the result of a society lacking the education about the consequences of pollution. Frankly speaking, it wasn't relatively that long ago that Americans were also commonly tossing things out their car windows with far less guilt than today. Besides, when you're concerned about whether you're going to have food to feed your children that evening ... all notions of environmental consciousness take a back seat.

Cultural differences, continued on page 4

Moseley leads DMH/DD/SAS

Secretary Carmen Hooker Odom has announced the appointment of Mike Moseley as director of the Division of Mental Health, Developmental Disabilities, and Substance Abuse Services. He assumed his new duties April 1.



Mike Moseley

“We are entering a new stage in mental health reform,” said Hooker Odom. “Today we are putting our plans into action, with the system changing across the state. Mike is the right person for this role, because of his many years of experience managing complex organizations and working to create community services for people with disabilities. That experience, coupled with his years of work across the division, makes him the perfect person for this crucial time.”

For the past five and a half years, Moseley has directed the Caswell Center, a state facility for people with severe developmental disabilities. During his time at Caswell, he worked to move clients from institutional care to community settings. Caswell Center’s population has dropped from 660 in 1998 to 480 today. Much of that difference is care.

“The days of focusing on big institutions as the only source of care are over. I’ve seen first-hand that it is possible to successfully transition people from large residential settings to community care,” said Moseley.

“Today’s mental health treatment must continue to be person-centered and community-focused. We must build a mental health system that supports people as individuals in their own neighborhoods to the greatest extent possible.”

In the mid 1990s, Moseley served as the first chief of the division’s crisis services section, where he worked to create community support structures for people in crisis. He also managed the state’s response to the Thomas S. class action lawsuit, which focused on developing community-based service options for adults with mental retardation determined to be inappropriately placed in state psychiatric hospitals.

From 1986 to 1991, he served as head of the division’s residential services branch, where he provided support for more than 250 community-based residential services for people with disabilities. Moseley was president and a founding member of Our Homes, Inc., a nonprofit that worked to establish community care for people with disabilities in Lenoir County.

Moseley has won numerous awards and honors for his work with people with developmental disabilities, including the ARC of North Carolina’s distinguished service award and the North Carolina Community Living Association’s distinguished community services award.

Moseley has worked in North Carolina’s mental health system since 1976, holding a variety of positions across the division, including director of the North Carolina Special Care Center and assistant director of Cherry Hospital. He is a native of Kinston. He holds a B.A. from the University of North Carolina-Chapel Hill and an M.A. Ed. in Special Education-Mental Retardation from East Carolina University.

Cultural differences, continued from page 3

But it definitely helps to express these observations so that both sides come together with more understanding of one another. Cubans will likely adopt more habits from the U.S., while Americans realize they shouldn’t take certain “unacceptable” behavior as personal or offensive — but simply an opportunity to educate (bearing in mind that educational norms are very, very relative and certainly not absolute truths!).

Oh, and for those wondering: my grandfather and other relatives still live in Cuba. This allows me to *legally* visit Cuba (something I had not done for more than a decade)!



Child Services, continued from page 1

- Parents and families are more satisfied with the state's Child Protective Services and seem more willing to cooperate with DSS;
- Children's safety is not adversely affected by MRS;
- MRS has not significantly delayed the initial 72-hour response time or the official case decision within 30 days; and
- MRS has improved communication and coordination across agencies.

"I congratulate the 10 counties who pioneered this huge system reform for their commitment to work in partnership with parents to ensure safety of their children," said Jo Ann Lamm, chief of Family Support and Child Welfare Services for the Division of Social Services. "Tony Troop is doing a great job as the state's MRS coordinator. And we could not do this project without all the work that Adolph Simmons does with Duke to facilitate the MRS evaluation and to help the counties collect necessary data and conduct an analysis.

"When it comes to child protection, we are never satisfied and never stop looking for ways to improve," Lamm added. "That's why we are so pleased that Duke's evaluation found such positive results occurring with MRS. This reform is already working to help preserve families and to change how child welfare does business. We're going statewide because MRS is good for families and good for children."

The North Carolina General Assembly passed legislation in 2001 requiring the N.C. Division of Social Services to pilot an alternative response system for child protection. Preliminary implementation of the MRS began in 10

counties in 2002: Alamance, Bladen, Buncombe, Caldwell, Craven, Franklin, Guilford, Mecklenburg, Nash and Transylvania. Effective October 2003, an additional 42 counties have begun to implement MRS.

The Duke report also provides a list of recommendations, including:

- Limiting caseload size to six to eight families per worker to ensure families receive a prompt and appropriate response, or implementing a "team" approach with teams consisting of investigators, case managers and foster care workers;
- Immediately providing additional and consistent training for line staff, supervisors and management;
- Immediately providing cross-agency, family-centered training for all agencies serving children and families;
- Immediately implementing an information system that enables the state to track families and evaluate costs and outcomes across time; and
- Conducting a more systematic and detailed evaluation when MRS has been in place for a longer period of time.

"This evaluation clearly shows that the Multiple Response System is preferred by social workers and families when investigating and supporting children," said Kenneth A. Dodge, principal investigator and director of the Center for Child and Family Policy at Duke.

Most parents in MRS reported feeling they were treated with respect by social workers and who did not presume guilt before collecting the facts, the study added. ■

Project C.A.R.E. wins Best Practices Award

Project C.A.R.E. (Caregiver Alternatives to Running on Empty), was chosen by the Geriatrics Best Practices Advisory Board as a best practice. In recognition of this honor, Project C.A.R.E. staff presented their program and received an award at the Geriatric Best Practices Conference on April 21-23, in Charleston, S.C.

Project C.A.R.E. is a three-year demonstration project funded by the U.S. Administration on Aging Alzheimer's Disease Demonstration Grants to States Program.

Operated by the Division of Aging and Adult Services, within the community-based contexts of the Western Carolina Alzheimer's Association and the Mecklenburg County Department of Social Services, Project C.A.R.E.'s two family consultants and one family caregiver specialist go into the rural and urban homes of referred Alzheimer's caregivers in crises.

The consultants/specialists offer consumer-directed guidance, counseling, support, advocacy, coaching and education for family caregivers. The aim is to match families with the most appropriate and preferred local respite and community services tailored to the unique context of care and family needs.

"It is an honor to be selected as a 'Best Practice' in Geriatrics," said Karisa Durence, Alzheimer's specialist in the Division of Aging, C.A.R.E. project director. "The key to the success of Project C.A.R.E is the role of the

family consultant; this award is in recognition of their dedication and hard work."

Through Project C.A.R.E., dementia caregivers may spend \$2,000-\$2,500 a year toward respite services. Families can choose among adult day care, in-home services, or institutional respite.

There are three project sites: Forsyth County (Winston-Salem); Polk, Henderson, Transylvania and Rutherford counties; and Mecklenburg County (Charlotte).

To date, Project C.A.R.E. has provided respite care to more than 291 families, with up to 150 on a waiting list for services. An additional 266 families received valuable consultation and information about other community resources. The average Project C.A.R.E. service time is 18 months, with monthly and quarterly follow-ups. Once families are referred, the consultant/specialist goes into the home, as soon as scheduling arrangements can be made, with the aim of initiating respite service within a week. Future plans are in place to position this service within the state plan for long-term care.

The Geriatric Best Practices Initiative is funded by the Duke Endowment in collaboration with the South Carolina Hospital Association. The initiative is managed by the Sage Institute. More than 200 senior service programs were visited and reviewed within the last 18 months to explore best practices. ■

Five-Star License is 'Innovations' finalist

North Carolina's Five-Star Rated License program is a finalist for the highly esteemed Innovations in Government Award competition. The program is now eligible to win \$100,000 in what is often referred to as "the Oscars" of government awards programs.

Before implementation of the Five-Star Rated License program, there were two types of licenses for child care centers and one type for family child care homes. The previous "A" and "AA" licenses for centers did not designate that the voluntary "AA" requirements were more stringent in some areas, and there were no higher standards for homes. The five-star rated license is a unique form of regulation that extends beyond minimum health and safety standards and provides North Carolina parents and guardians with a consumer friendly tool to measure and compare the quality of child care providers.

Through ratings of one to five stars, licensing in North Carolina now provides an accurate reflection of the quality of care offered by a facility. A mandatory one-star rating is given to programs achieving minimum health and safety standards and staff qualifications. Programs may voluntarily apply for ratings of two to five stars, indicating they have exceeded mandatory licensing in program standards, staff education and compliance history.

North Carolina's Five-Star Rated License was one of nearly 1,000 applicants for the 2004 Innovations in American Government Award. Each of the 15 finalists will deliver a presentation before the National Selection Committee at Harvard University on May 12. Five winners will be announced July 28. ■

Ann Johnson Institute graduates first class



Ann Johnson, front center, with the first class of graduates of Ann Johnson Institute for Senior Center Management.

The Ann Johnson Institute for Senior Center Management recently graduated its first class. The graduates were recognized at a ceremony in Atlantic Beach on March 31.

“The training this class has received will be reflected in a higher quality of their senior centers,” said Ann Johnson, chair of the Governor’s Council on Aging and for whom the organization is named. “These efforts should result in better access to services for older adults and their families.”

In 2001, the Division of Aging and Adult Services initiated the management training program for senior center managers and leaders.

“Our objective with the Ann Johnson Institute for Senior Center Management is to support senior center personnel by offering a curriculum to increase management skills, upgrade credentials, and enhance the senior center management profession,” said Karen Gottovi, director of the Division of Aging and Adult Services. “We are very proud of this first group of graduates and congratulate them on this significant accomplishment.”

The three-year certificate program is named in honor of Ann Johnson, a nationally recognized aging advocate and champion of senior centers, who has been a strong

advocate for the division to develop a management training certificate program. Johnson chairs the Governor’s Advisory Council on Aging.

Content and format of the training modules is based on responses to surveys, focus groups, meetings with senior center managers and the input of an advisory group comprised primarily of senior center directors. Training topics were chosen to mirror those that senior center managers and directors felt were most needed to do their jobs effectively. The UNC-Chapel Hill School of Social Work’s Center for Educational Research and Educational Studies (CARES) is assisting the division with developing, facilitating and evaluating the training.

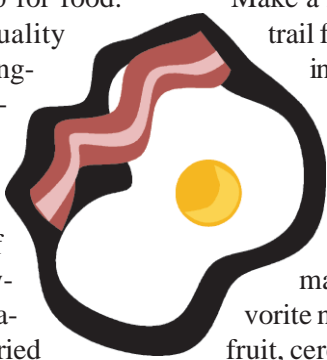
Six individual training modules are included in the curriculum. The division will present two new modules each year, so senior center managers can become certified over a three-year period. All six modules must be completed to receive a certificate, although there is no required order and participants may begin with any module.


The Institute is the second major step in a multi-year, comprehensive approach to enhance senior center development in North Carolina and works in conjunction with the senior center certification process developed by the division.



Ten Smart Eating Tips for Hiking Trips

The right stuff makes a big difference on hiking or backpacking trips. Having the right foods and fluids is as important as having the proper equipment and accurate maps. Eating right and staying hydrated helps maximize physical endurance and mental concentration. If you get lost or are stranded, your nutritional status might be a real lifesaver. Here are 10 tasty tips and fueling your next backcountry adventure.

1. Start the day before: Drink plenty of water and eat plenty of whole grains the day before a trip. This helps maximize the fluid and energy stored in your muscles.
2. Take time to shop for food: Last minute scrounging through your cupboard usually doesn't produce the best options.  Make a list and shop smart for quality trail food. ing boards pro-tions. trail made mix vorite nuts, fruit, cereal, chocolate bits.
3. Mix up a batch of mix: Buy a ready-made mix or combine your favorite sunflower seeds, dried small crackers and a few chocolate bits.
4. Eat a high-octane breakfast: Power your body for the day ahead with quick energy (bagels or oatmeal) and long-lasting protein (eggs, Canadian bacon or cheese).

5. Drink before you hit the trail: Carry juice, low-fat milk and hot chocolate for the drive to the trailhead. Drink as much as you comfortably can before you start to hike. 
6. Bring a backpack full of water: The new personal hydration systems allow you to carry 70 to 100 ounces of water and to drink all you need without stopping.
7. Drink before you feel thirsty: The thirst mechanism doesn't kick in until you are already partially dehydrated. Drink often and regularly – 8 to 16 ounces every hour.
8. Plan for fluid emergencies: Always have a way to purify water (pump or pills) along the way. Dehydration can be disorienting, the last thing you want on the trail.
9. Keep ready-to-eat snacks: Keep trail mix or some nuts in your pockets. If you start to feel tired or cranky, don't wait for lunch. Fuel your muscles when they need it.
10. Pack extra food: Difficult situations can become disasters if you don't have enough fuel to think clearly and to keep moving. Always carry an emergency supply of energy bars, nuts and jerky – above and beyond what you need for your current trip. ■

National Nutrition Month 2003
Adapted by the NC NET Program from Eat Right Montana materials



Ten Fitness Tips for Hiking Trips

Hiking and backpacking adventures can be lots of fun or not! Your overall fitness has a big impact on your comfort level during, and after, a hike or backpacking trip. Weekday couch potatoes who try to become weekend warriors often end up injured or completely exhausted. Here are 10 sensible tips guaranteed to make your next hiking and backpacking trip safer and more enjoyable for you and those around you.



1. Be realistic: If you've been sitting around for months, a 20-mile day hike or a two-week backpacking trip is a recipe for a serious injury, a heart attack or worse.
2. Get a professional opinion: If you already have health problems (like high blood pressure), check with your health care provider before you go on an extended trip.
3. Stay in year-round shape: "Use it or lose it" is more than a clever saying. If you are out of shape, it can take 6 to 8 weeks to build up muscle tone and endurance.
4. Practice the activity you want to do: The best way to get in shape for hiking is to walk up hills – even little hills. Walking up stairs can be a good substitute.
5. Focus on your core: Your back and stomach muscles must be strong and flexible for carrying packs, twisting, starting and stopping. Think crunches!
6. Warm up your muscles: Pushing too hard before your muscles have warmed up is one of the quickest ways to get injured. Start by gently swinging your arms and legs.
7. Build up slowly: No one can get fit overnight. The best way to improve performance is to gradually increase effort. Give yourself time!
8. Stretch, stretch and stretch again: Slow stretching, not bouncing, helps prevent injuries and muscle soreness especially if you stretch at the end of an activity.
9. Know your limits: A real hero is the one who says it's time to turn back. Learn to gauge your endurance level and start heading home before you are exhausted.
10. Pay attention to nutrition: Food, fluids and fitness go hand-in-hand. Your muscles need the right fuel to train and to perform. ■

National Nutrition Month 2003

Adapted by the NC NET Program from Eat Right Montana materials

Long-term plan brings hope to ending homelessness

The 10-year plan, a comprehensive approach toward ending homelessness, is catching on in North Carolina.

A national effort aimed at eliminating homelessness that gained endorsement from 108 communities nationwide, has Raleigh-Wake County as its 100th to sign on to the effort.

The 10-year plan concept is being spearheaded at the federal level by Philip F. Mangano, executive director of the U.S. Interagency Council on Homelessness. It has also gained endorsements from the U.S. Conference of Mayors, the National Association of Counties, and the U.S. League of Cities. In North Carolina, the United Way of North Carolina is also encouraging its local affiliates to become involved in local 10-year planning processes.

The goal is to develop practical, realistic plans that begin with lifting the chronically homeless off the streets, and move preventing homelessness for all populations.

To date, five North Carolina communities have begun a planning process that is endorsed by the local mayor and/or county board of commissioners chair. Asheville/Buncombe County, Winston-Salem/Forsyth County, and Raleigh/Wake County were visited while Mangano was in town, but Durham/Durham County and the City of Gastonia have also initiated this process. North Carolina Homeless Policy Specialist Martha Are joined Mangano as he toured the state in mid-April to visit with local officials and discuss their plans.



(Left to right) Martha Are and Philip F. Mangano discussed a 10-year plan with Asheville Mayor Charles Worley, Kristy Carter, executive director of Hospitality House, and grant-writer Robin Merrell from Pisgah Legal Services.

“The shift toward a formal municipal - endorsed process is borne out of a recognition that the traditional homeless service arena – nonprofits and faith-based organizations – can not end homelessness at the local level by themselves. Instead, that sector has to partner with the public and for-profit sector,” Are said. “Additionally,

the local government will partner with the state and federal level. When this has happened in other communities, measurable reductions of the homeless population have occurred long before the 10-year goal.”

Later, Mangano spoke to an Inter-College Conference to End Homelessness, held at St. Augustine’s College in Raleigh. “Spare change is not enough,” Mangano told conference attendees. “We need real change. Substantive change. On our streets. In homeless programs. In our communities. In the circumstances of homeless people.”

The North Carolina Interagency Council for Coordinating Homeless Programs, appointed by Governor Easley and housed in DHHS, is aggressively shaping homeless policy through creation of a 10-year-plan to end homelessness. The North Carolina plan builds on new research and new service designs with documented outcomes that provide new tools for working with what used to be thought of as an intractable problem. ■

Bunnies bring smiles

The eleventh annual DHHS Easter Bunny Drive resulted in enough stuffed toy animals to brighten faces and moods of patients, residents and children in 16 Triangle area care facilities.

The collections were through the efforts of the department's 'Bunny Chick,' Beverly Godwin, with assistance from Katie Berndt, Beverly Townsend, Brenda Hodges, Michele Godwin, Brenda Eason, Ann Rudd, Angela Ray, Robyn Slate, Barbara Whitaker, Debbie Souza, Chris Nobling, Jennie Chen and Donna Miles.

"We outdid ourselves this year," Godwin said. "We collected 1,137 bunnies, chicks and other furry critters.



Here are some of the bunnies and other critters collected at the Kirby Building on the Dorothea Dix campus.

It was a record-breaking year."

The furry friends were distributed to the following facilities: Wake Emergency Room, Wake Pediatric Unit, Hilltop Home, Tammy Lynn Center, Dix Hospital, Rex Hospital, Johnston Memorial Hospital, Betsy Johnson Hospital, Raleigh Rescue Mission, Western Wake Hospital, Raleigh Community Hospital, Good Hope Hospital, Parrish Nursing Home, Dunn Rehab and Nursing Home, Britthaven Nursing Home, and Youth Education Achievement Center.

Godwin said a special thank-you to all contributing employees. "Your hard work helps make the drive a success each year," she said.

Adoption Profile

Introducing Beth...

Beth has dark hair and beautiful brown eyes to complement her pleasing, bubbly personality. She is active in her church with the drama and dance ministries. In school, Beth likes to play basketball and volleyball, and she hopes to run track. She loves to travel and eat at Zaxby's.

Beth's intelligence is above average and she has the potential to be an honor roll student. Sports have been an excellent match for her abundant energy, as well as a positive way to express her feelings. She has lots of friends, but Beth needs help making good choices. She also needs to learn that she is not always the center of the universe.



Beth
b. May 9 1991

A Family for Beth

Beth's foster mother remarked that, "Beth has great potential if she could stay focused and realize that her life has purpose." An adoptive family for her would need to help her find or develop that purpose. Beth also needs help understanding boundaries and limitations. She will respond best to lots of structure and defined guidelines. Beth would love a family that is active, that would be supportive of her participation in sports, and that goes to church regularly. (NC #081-206)

For more information on this child or adoption or foster care in general, call NC Kids Adoption and Foster Care Network toll free at 1-877 NCKIDS-1 (1-877-625-4371).